

**OFFICE OF STATEWIDE REPORTING AND ACCOUNTING POLICY  
VENDOR TRAINING REQUEST FORM**

<b>TRA NEE INFORMATION</b> <i>(please print)</i>		
<b>Name:</b>	<b>Phone:</b>	
<b>SSN:</b>	<b>Fax:</b>	
<b>Department Name:</b>	<b>Agency #:</b>	
<b>Agency Name:</b>	<b>Dates Unavailable for Training:</b>	
<b>Street/P.O. Box:</b>		
<b>City and Zip:</b>		
<b>User ID:</b>		
<i>Place a check (T) beside the date and course(s) that individual wishes to attend.</i>		<b>T</b>
<b>March 2001</b>		
<b>3/26</b>	<b>8:00 AM – 4:00 PM</b>	
<b>3/27</b>	<b>8:00 AM – 12:00 PM</b>	
<b>3/28</b>	<b>8:00 AM – 4:00 PM</b>	
<b>3/29</b>	<b>8:00 AM – 12:00 PM</b>	
<b>Agency Fiscal Officer/Training Coordinator Approval</b>	<b>Date</b>	<b>Phone</b>

**DEADLINE:**

**March Classes                      3/5/01**

Completed forms may be sent by mail to:  
Office of Statewide Reporting and Accounting Policy  
P. O. Box 94095  
Baton Rouge, LA 70804-9095  
ATTN: Angela Murphy

**Messenger mail to:** 1051 North Third Street (Capitol Annex), 1st Floor  
**FAX to:** 225-342-1053